

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3	/					
4		/				
5	/					
6	/					
7	/					
8		/				
9		/				
10		/				
11		/				
12		/				
13		/				
14		/				
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47						
48						
49						
50						
TOTAL IND.	2					
TOTAL DEP.	21	↓	↓	↓	↓	↓
TOTAL CLAIMS	23	5				

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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97						
98						
99						
100						
TOTAL IND.			↓	↓	↓	↓
TOTAL DEP.			↓	↓	↓	↓
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS